## PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003

Application or Docket Number

10634243

CLAIMS AS FILED - PART I (Column 1)					(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			m			Ī	ſ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBI	ER EXTRA	В	ASIC FÈE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			50 minus 20=		* 30			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			2 minus 3 =		* 6			X42=		OR	X84=	540
MU	LTIPLE DEPEN	DENT CLAIM P	ESENT		- 1			+140=		OR	+280=	
* If the difference in column 1 is less than 2				ro, enter	"0" in c	olumn 2	L	TOTAL	-,	OR	TOTAL	1290
CLAIMS AS AMENDED - PAR (Column 1) (Colum						(Column 3)		SMALL E	NTITY	OR	OTHER SMALL	THAN
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18≐	
	Independent	*	Minus	***		=		X42=	*	OR	X84=	
	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDEN	CLAIM		J	+140=		OR	+280=	
							L	TOTAL		00	TOTAL	
	75	(Column 1)		(Colu	mn 2)	(Column 3)		DDIT. FEE			ADDIT. FEË	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI		PRESENT EXTRA		RATE	ADDI- TIONAL FEE	*	RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	-	=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	CLAIM	1 35	┙┟	+140=		OR	+280=	
							2	TOTAL		OR	TOTAL	
-31 <del>-</del> 122		(Column 1)		-(Cohi	mn 2)	(Column 3)		DDIT. FEE	1 - 1	Į O i i	ADDIT. FEE	
AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	1	X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM		┙┞					
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280= TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The "Highest Nur	mber Previously Pa	id For" (Total o	r Independ	dent) is the	e highest numb	er four	nd in the app	propriate bo	x in co	lumn 1.	